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30448 7590 08/09/2006

AKERMANTENTERFITT  
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Mark D. Passler

(Depositor's name)

(Signature)

9-12-06 (Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO
10/786,899	02/24/2004	Kazuo Maezawa	1625-172	6754

TITLE OF INVENTION: FIXATION FRAMEWORK FOR RING-SHAPED PERMANENT MAGNET

APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	11/09/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
SCHEUERMANN, DAVID W	2834	310-014000

1 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached  
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2 For printing on the patent front page, list

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1 Akerman Senterfitt

2

3

3 ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Twinbird Corporation

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Nishikanbara-gun, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted

- ☒ Issue Fee  
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- ☐ a Applicant claims SMALL ENTITY status. See 37 CFR 1.27 ☐ b Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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9-12-06

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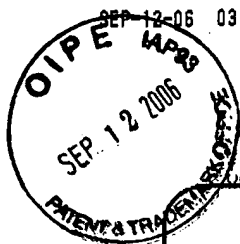
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40,764

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10788,899	
	Filing Date	02/24/2004	
	First Named Inventor	MAEZAWA	
	Art Unit	2834	
	Examiner Name	SCHEUERMANN, DAVID W	
Total Number of Pages in This Submission	2	Attorney Docket Number	1625-172

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOL-85B
<b>Remarks</b>  Please charge \$1015.00, plus any deficiencies, to Deposit Account No. 50-0951		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Mark D. Passler, Registration No. 40,764 Akerman Senterfitt
Signature	
Date	9-12-06

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Typed or printed name	Mark D. Passler	
Signature		Date 9-12-06

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